COMBINED DECLARATION AND POWER OF ATTORNEY

As the below named inventor, I hereby declare that:

FAX: 886-2-2369 7233

My residence, post office address and citizenship are as stated below next to my name and that I believe I am an original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

METHOD OF FORMING DUAL-IMPLANTED GATE AND STRUCTURE FORMED BY THE SAME

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	Number	Country	Date Filed(yyyy/mm/dd)	Yes	No	
	91112177	Taiwan, R.O.C.	2002/6/6		X	
traı	- ' ')	- •		
	SEND CORRESPONDENCE TO:			DIRECT TELEPHONE CALLS TO: (Name and telephone number)		
				Belinda Lee		

COMBINED DECLARATION AND POWER OF ATTORNEY CONTINUED

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Sole or First Joint Inventor: Benny Yen

Citizenship: Taiwan, R.O.C.

Residence and Post Office Address: No. 24, Alley 9, Lane 543, Shinjuang Rd., Shinjuang City,

Taipei, Taiwan 242, R.O.C.